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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Kellock, Peter Rowan, et. al.	)
Application No.:	09/509,280	) Shawn S. An,
Attorney Docket:	LWS10004P0010US	) Patent Examiner, ) Art Unit 2613
Associate Docket	FP1836/cw	) }

## AMENDMENT AND RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

With reference to the Office Action dated March 9, 2005, you are requested to amend the claims, as set forth on the following pages, to charge any additional filing fee that may be thus due to Deposit Account No. 23-0785, and to reconsider this application, as amended.

[to next page]

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PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 29, 1999											
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SM/		ENTITY	OR	OTHER		
FO	R	NUMBE		NUMBER E		RA	ΓE	FEE		RATE	FEE
BASIC FEE					OR		970				
TOTAL CLAIMS 99 minus 20= • 19			X\$	9=		OR	X\$18=	1422			
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MULTIPLE DEPENDENT CLAIM PRESENT						+13	0=		OR	+260=	
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F	FIRST PRESE	NIATION OF M	ULTIPLE DE	PENDENT CLAIM	*,	+1	30=		OR	+260=	
	if the entry in colur	nn 1 is less than	the entry in colu	mn 2, write 'V' in or	itumn 3.	- 10	OTAL		OR	TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
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Application or Docket Number .